PTC/SB/08a (08-03)
Approved for use through 09/30/2005. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

INFOR		Substitute for form 1449A/PTO						Complete if Known					
INFOR							ation Number	10/582,926					
INFORMATION DISCLOSURE STATEMENT BY APPLICANT						Filing Date		May 15, 2007					
						First N	amed Inventor	Xaver Laufenberg et al.					
						Art Unit		<del>2007</del> 2834					
(Use as many sheets as necessary)							Examiner Name		To be assigned Cuevas, P				
Sheet	2-	1 of 1					y Docket Number	10191/4796					
					U.S. P.	ATENT	DOCUMENTS						
Examiner Initials *	Gite Document Number No.1 Number - Kind Code <sup>2</sup> (if known)			Publication Date MM-DD-YYYY		Name of Patenties or Applicant of Cited Document		Pages, Columns, Lines, Where Relevant Passages or Relevant Figures Appear					
											-		
									***************************************	***************************************			
									$\vdash$				
			***************************************	***************************************					$\vdash$				
					EOREIGN	PATE	NT DOCUMENT	-6					
$\neg$		Foreign Petent Documen				TATERT BOODMENTO			Pages, Columns,				
Examiner !nitials*	Cite No.1	Coun	Country Code <sup>5</sup> - Number <sup>6</sup> - Kind				Publication Date MM-DD-YYYY	Name of Pa Applicant of Document	of Cited	Lines, Where Relevant Passages or Relevant Figures Appear	70		
/P.C./		JP2003174797			June 20, 2003					*			
										***************************************	-		
		+											
		+		-	STATE OF THE PERSON NAMED IN COLUMN	1							
*C0-b 1					744	_							
'⊨ngiisn i	anguag	e abst	ract pro	vided her	ewith.								
				NC	N PATENT	LITER	ATURE DOCUM	IENTS					
	Γ	Τ,	al. ala								Т		
Examiner Initials *	Cite No.1	Include name of the author (in CAPITAL LETTERS), title of the article (when appropriate), title of the item (book, magazine, journal, serial, symposium, catalog, etc.), date, page(s), volume-issue number(s), publisher, city and/or country where published.											
										The same of the sa			
	L								-				
								Name of Street, or other Persons					
		1				-							
					Sales Sa						1		
			-										
Examiner	aminer /Pedro Cuevas/						Date	0:	01/04/2009				

\*EXAMINER. Initial if reference considered, whether or not clustion is in conformance with MFEP 669. Draw line through clustion if not in conformance and not considered, include copy of this form with next communication to applicant. Applicant is unique citation designation number (copicant). See Kinds Codes of USFTO Patters (Documents as year, using accord refer 90%). As Juntary (line in a tissued the document, by the two-letter code (WFFO Standard ST.). For Fore 1 pages of the Imperor must precede the sortal number of the patent document. Nint of documents of the page of the Imperor must precede the sortal number of the patent document. Nint of document work in the Communication of the page of the Imperor must precede the sortal number of the patent document. Nint of document work in 1 page of the page of the Imperor must precede the sortal number of the page of the page of the Imperor must precede the sortal number of the page of the Imperor must precede the sortal number of the page of the Imperor must precede the sortal number of the page of the Imperor must precede the sortal number of the page of the Imperor must precede the sortal number of the page of the Imperor must precede the sortal number of the Imperor must precede the Imperor must pre

This collection of information is required by 37 CFR, 107 and 198. The information is required to obtain or rotain a become fly the public which is to the and by tSPFO to possepul an application Confederable in gardness one by 58 USC. 122 and 27 CFR, 144 This collection is estimated to lake 2 tooms from the public should be an extra the confederable and the second properties including address; properties, and submitting the completed explication form to the USPFO. Time will very depending upon the infinitial case. Any comments on the amount of time you require to complete distinction and configuration of time you require to complete distinction. Office, US. Department of Commerce, P.O. Box 1450. Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450. Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patients, P.O. Box 1450. Alexandria, VA 22313-1450.